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**APPLICANTS**

Connie Sanchez, Glostrup, DENMARK;  
 Jesper Lyng Jensen, Kirke Hyllinge, DENMARK;  
 Arne Mork, Malov, DENMARK;

**\*\* CONTINUING DATA \*\*\*\*\***

This application is a CON of PCT/DK02/00281 05/01/2002

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

DENMARK PA 2001 00684 05/01/2001

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\***

11/13/2003

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY DENMARK	SHEETS DRAWING 0	TOTAL CLAIMS 17	INDEPENDENT CLAIMS 1
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>JSB</i>				

**ADDRESS**

7278

**TITLE**

Use of enantiomeric pure escitalopram

<b>FILING FEE RECEIVED</b> 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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